Revion:

HCFA-AT-81-37 (BPP)

SUPPLEMENT 6 TO ATTACHMENT 2 %-a Page 1

State:	Idaho	U
Standard	s for Optional State Supplementary Payme	nts

Payment Category	Administered by		Income Level <u>Gross</u> Net			et	Income Disregards
(Reasonable Classification)	Federal	State	1 person		1 person	Couple	Employed
(1)	(2)		(3)		(4)		(5)
Aged, Blind, Disabled - Living Independently, Including room and board paid to a parent, child or sibling		X	1,536	3.072	595*	869*	
Aged, Blind, Disabled - Unlicensed Shelter Home		X	1,536	3,072	373	746	
Aged, Blind, Disabled - Room and Board		X	1,536	3,072	690	1,380	
Aged, Blind, Disabled - Semi-Independent Group Residential Facility		X	1,536	3,072	690	1,380	* Includes \$50 Special Needs
Aged, Blind, Disabled - Adult Residential and Assisted Living Facility and Certified Family Home		X					Allowance for each person
Level I Level II Level III			1,536 1,536 1,536	3,072 3,072 3,072	838 905 973	1,676 1,810 1,946	

TN No.<u>CO · CO /</u> Supersedes TN No. <u>79-06</u> Approval Date <u>6/16/00</u>

Effective Date ////00

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STATE: _____IDAHO

The Medicaid income limits shown on Page 1 of this Supplement are based on budget allowances for specific living situations. The sum of the budget allowances for a client's specific living arrangement is the client's Medicaid income limit. The budget allowances are a Basic Allowance and, for some living situations, a Special Needs Allowance. Both Special Needs Allowances are as paid, up to a maximum (see Page 1.b.). The Special Needs Allowances are standard amounts. These are: a \$17 Guide Dog Food Allowance for a blind client with a guide dog trained by a recognized guide dog school; a \$50 Eating in Restaurants Allowance for a client who is physically unable to prepare his own meals, as verified by a doctor, or a client who is temporarily without cooking facilities. (The income limits shown on Page 1 do not include income limits for HCBS and Nursing Facility/ICF-MR clients.)

The chart on Page 1.b. shows the allowances used to establish the Medicaid income limit for the recognized living arrangement. These limits may be increased by the Guide Dog Food or Restaurant Meals Allowances, as appropriate.

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Approval Date <u>3/18/99</u>

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SUPPLEMENT 6 TO ATTACHMENT 2.6-a Page 1.b.

STATE:I	daho
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INCOME LIMITS BY LIVING SITUATION					
Living Situation	Medicaid Income Limit				
INDEPENDENT Single Couple	\$545 (\$545 Basic Allowance) \$768 (\$768 Basic Allowance)				
ROOM AND BOARD (Not paid to parent, child or sibling)	\$690 (\$58 Basic Allowance plus \$632 Room and Board Allowance)				
SEMI-INDEPENDENT RESIDENTIAL FACILITY	(\$349 Basic Allowance plus \$341 Semi-Independent Group Residential Facility Allowance)				
CERTIFIED FAMILY HOME (CFH)/RESIDENTIAL AND ASSISTED LIVING FACILITY (RALF)	Level I \$832 (\$58 Basic Allowance plus \$774 CFH/RALF allowance) Level II \$899 (\$58 Basic Allowance plus \$841 CFH/RALF allowance) Level III \$967 (\$58 Basic Allowance plus \$909 CFH/RALF allowance)				

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